DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 07/28/2006

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006 Community Based Residential Facility CLASS CNA (NONAMBULATORY) STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Facility Information

Facility Name: CENTURY RIDGE I (410270)

Address: 2498 BLUESTONE PL, GREEN BAY, WI 54311

License Status: REGULAR

Licensed/Certified/Registered 11/01/1992

Regional Office: NORTHEASTERN REGION (GREEN BAY), (920) 448-5240

Survey History

Survey ID: 0094607 End Date: 04/14/2005 Type: STANDARD Purpose: SURVEY/SELF REPORT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10007144 Served 05/02/2005

Deficiencies Cited Subject Area Subject Area Subject Area Corrected

83.14(1)(c) UNIVERSAL PRECAUTIONS

83.42(2)(a) EVALUATION RESIDENT EVACUATION LIMITS

Survey ID: 0092070 End Date: 01/30/2004 Type: OTHER Purpose: VERIFICATION VISIT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0091255 End Date: 10/08/2003 Type: OTHER Purpose: SELF REPORT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10006901 Served 10/25/2003

Deficiencies Cited	Subject Area	<u>Verified</u>	Corrected	
83.07(14)(a)	POSTINGS OF CITATIONS AND NOTICES	01/30/2004	Yes	
83.13(4)(a)	COMMUNICABLE DISEASE CONTROL	01/28/2004	Yes	
83.32(2)(a)5	HARMFUL BEHAVIOR PATTERNS	01/30/2004	Yes	
83.32(2)(a)5	HARMFUL BEHAVIOR PATTERNS	01/30/2004	Yes	

Compliance

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 07/28/2006

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006 Community Based Residential Facility CLASS CNA (NONAMBULATORY) STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Enforcement History

Date: 04/29/2005

SOD #10007144

Appealed: No

Sanctions

FORFEITURE---83.14(1)(c)

Date: 10/22/2003

SOD #10006901

Appealed: No

Sanctions

FORFEITURE---83.13(4)(a)

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.